WASHINGTON

FOCUS

News and Information to Promote a Drug Free Washington

Winter 2003/2004 Volume 13, Number 4

WASHINGTON STATE DEPARTMENT OF SOCIAL AND HEALTH SERVICES • DIVISION OF ALCOHOL AND SUBSTANCE ABUSE

Joint Project Receives Governor's Award for Improving Services to Medically Vulnerable People

The Medical Cost Offset project, an innovative approach in shifting Medicaid dollars to provide earlier and faster drug and alcohol treatment for clients identified with serious medical disabilities, was recently selected to receive the Governor's Quality and Performance Award.

The project, which was a joint effort by the Medical Assistance Administration (MAA), the Division of Alcohol and Substance Abuse (DASA), and the Research and Data Analysis (RDA) Division, was recognized for its work in strengthening the safety net for some of Washington's most vulnerable populations with efficiencies that actually lowered the cost of their medical benefits for state taxpayers by millions of dollars.

RDA's analysis showed that the total monthly cost of treating Medicaid clients who needed drug or alcohol treatment but did not receive it averaged \$1,371, while

Joint Project continued on page 3



Front row from left: Sally Lambert, Columbia River Mental Health; Amy Bohn, citizen representative; Dr. Elizabeth Kohlenberg, RDA; Donna Bosworth, Thurston County Public Health and Social Services; Fred Garcia, DASA; Dr. Sharon Estee, Kohlenberg, RDA; Donna Bosworth, Thurston County Public Health and Social Services; Fred Garcia, DASA; Dr. Sharon Estee, Kohlenberg, RDA; Donna Bosworth, Thurston County Public Health and Social Services; Fred Garcia, DASA; Citizen representative; Corki Hirsch, DASA; Gov. Gary Locke; Dr. Daniel Nordlund, RDA. Back row from left: Shelly Player, citizen representative; Cleve Thompson, Clark County Department of Community Services; Pennie DASA; Alice Collins, citizen representative; Cleve Thompson, Clark County Department of Community Services; Pennie DASA; Alice County Human Services; Tom Bedell, MAA; Dr. Antoinette Krupski, DASA.

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Please send questions, comments or suggestions for articles to:

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Prevention and Treatment Resources

DASA website: www1.dshs.wa.gov/dasa

Chemical Dependency Professionals: http://www.cdpcertification.org/default.asp

Alcohol/Drug 24-Hour Helpline: 1-800-562-1240 www.adhl.orq

Alcohol/Drug Prevention Clearinghouse: 1-800-662-9111

http://clearinghouse.adhl.org

Media Literacy: www.teenhealthandthemedia.net

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FOCUS is published quarterly for those in the chemical dependency field by the Division of Alcohol and Substance Abuse, within the Washington State Department of Social & Health Services.



Vision for Prevention and Treatment:

New DSHS Assistant Secretary for Children's Administration

By Ken Stark

A few weeks back, Tim Brown, Fred Garcia and I met with Ms. Uma Ahluwalia, the new DSHS Assistant Secretary for Children's Administration (CA). The purpose of the visit was to discuss the need for our two systems to collaborate, and to develop plans for future activities. We all recognized that we often serve the same families, and it would benefit clients and their families if we would improve our communications and find new ways to work together.

It was a fruitful meeting and a pleasure to discuss collaboration with Uma. She described the misuse of alcohol and other drugs and domestic violence as two of the major drivers of families getting pulled into their system. Both Uma and I believe that we can develop some strong collaboratives. Toward this end, several follow up steps were identified.

One of the next steps identified is to update the 1999 Memorandum of Agreement between DASA and CA. We agreed to form a workgroup with approximately seven people representing each system. Those who will represent alcohol and other drug issues are: Florence Bucierca, Clallam County Coordinator; Melissa Laws, Prosperity Counseling and Treatment: Vicki Stark. Perinatal Treatment Services; Rose Mary Anderson, Muckleshoot Indian Tribe; Ray Antonsen, Region 1 DASA; Sue Green, DASA Women's Treatment Lead; Shelli Young, DASA Regional Prevention Manager; and Fred Garcia, Chief, Office of Program Services, DASA.

We also agreed to get our respective research staff together to explore potential areas of collaboration. We need to look specifically at how many people are referred by CA for treatment, how many of them actually admit to treatment, and how many complete treatment. We need to look at their outcomes in terms of usage of other public services, employment and family well-being.

We also agreed to jointly explore the use of urinanalysis as a tool for surveillance, treatment and accountability. Additionally, we will see if working together can lower the costs each system bears for these services.

Finally, we will look at targeting prevention services to CA clients. We know that approximately 68 percent of children placed in foster care are there due to parental misuse of alcohol or other drugs, and that these children are at much higher risk to misuse drugs, as well as other problem behaviors. These youth are in high need of preventative interventions.

In this time of fiscal crisis, collaboration becomes the public policy watchword. It is clear that both DASA and CA value collaboration. We look forward to making sound policy decisions working in harmony with Uma and her staff.

Joint Project continued

those clients who participated in the screening had costs of only \$957 per client, including treatment costs. Savings of \$252 per month per client totaled \$2.5 million over the course of a year.

"This was a success by every measurement," Gov. Gary Locke said. "Not only did these clients show better outcomes and require less expensive medical care, but those who received the alcohol or drug abuse treatment earlier and faster were also 16 percent less likely to be re-arrested or 15 percent less likely to be convicted of a crime than those who needed the treatment but did not get it."

DASA's Director, Ken Stark, said the challenge for the state now will be to apply the project's lessons to the estimated 15,000 Washington residents who would benefit from similar treatment options. "Put simply, three dollars in costs are saved for every one dollar spent on alcohol or other drug treatment."

A Citizen Representative in the Cost Offset Study Shares How Treatment Works

My name is Alice Collins and I am here to tell you about a wonderful program that, after 30 years of drug dependency, has made me a responsible and worthwhile person.

I belong to a program called Center for Dual Diagnosis Recovery (CDDR), part of Columbia River Mental Health Services in Vancouver. CDDR helps the gravely disabled, parenting women, people with schizophrenia, the general population and, last but not least, seniors who need an aftercare program.

Every minute I spend with my therapist, Magan, and with my group, is like money in the bank – when needed, I can make a withdrawal.

CDDR has saved my life and many others who are now in recovery. It is a very needed program for people in recovery with mental health problems – which

many don't even know they have.

CDDR is responsible for my three years of recovery after 30 years of drug dependency. I have learned how to live responsibly and without misusing drugs. I can live off the interest of bankable knowledge I have gained from CDDR. Thank you!



The Washington State Department of Social and Health Services ▲ Division of Alcohol and Substance Abuse



PRESENTS:

The Third Annual

Washington State Institute on Addictions Treatment

The Institute is designed for chemical dependency professionals looking for professional development opportunities. Participants will earn up to 32 chemical dependency continuing education credits.

The Institute will provide intensive, skill-based instruction. In addition, the Institute will offer a wide variety of workshop presentations covering the current issues facing the chemical dependency field, as well as the latest counseling techniques.

Location: Seattle Pacific University ▲ Registration information will be mailed Spring 2004.

Personal Stories Tell the Truth About Marijuana

By Stephen Bogan, Youth Treatment Lead

At the 2003 Washington State Prevention Summit in October, the focus of the Town Hall Meeting was "Cutting Through the Myths...Let's Talk About the Harmful Effects of Marijuana for Youth." In order to provide this critical perspective, a distinguished panel of local and national prevention and treatment experts, intervention specialists, and persons in recovery provided accurate, clear, and moving testimonies to a capacity crowd.

The brochure for the Town Hall Meeting opened with a quote from John P. Walters, Director of the White House Office of National Drug Control Policy, who stated that "the public debate over marijuana has been plagued by difficulties, not the least of which is lack of accurate information."

I was honored to be the facilitator of the panel, which included Robert W. Denniston, Deputy Director at the White House Office of National Drug Control Policy, Dr. Fred Montgomery, Medical Director at Sundown M Ranch, Ed Mosshart, Director of Youth Treatment at Sundown M

Ranch, Sharon Cleary,
Horizon Treatment Services Intervention Specialist in the Sumner
School District, Bryan
Cussons, a Chemical Dependency Professional at
Sundown M Ranch, and Chris
R. (last name withheld by request), a young man in recovery from his marijuana addiction

The panel shared current facts about how marijuana has become a much more potent drug, is used by much younger youth and children, and that youth per-

ceive the drug as less harmful. Ed Mosshart from Sundown related that, "This was clearly a controversial topic, yet the dialogue remained open and productive. I was impressed by the common ground that we all seemed to find, giving me hope for a more inter-disciplinary approach to the problems faced by our youth."

A 14-year-old female at the Town Meeting asked Dr. Fred Montgomery "What do I do if I like to smoke weed?" Dr. Montgomery shared that "This statement, I think, is the core of the problem and the core of the solution." He ad-

vised this young person to "look at your family history (genetics), and if there is chemical dependency, then you must not continue. Also, if using marijuana is negatively affecting family relationships and personal goals, then you also must make a decision not to continue. This is the core of prevention, to stop use before problems develop."

The most moving accounts were those shared by Bryan Cussons and a young man named Chris. In telling their

personal stories of how marijuana so pro-

foundly affected their lives, the audience was greatly impacted. Chris stated, "I really enjoyed the whole Prevention Summit and the Marijuana Town Meeting. It's really awesome that kids are going to these things. I never went to any prevention conferences, and didn't even know about them. My presentation went well and I helped others as well as myself." Bryan related the following about his experience: "It was a very

rewarding and gratifying experience to share with others, especially so many young people, about the effects of marijuana use. Marijuana is sometimes seen as "safe" and just a "gateway" drug to harder ones. I felt the conference dispelled many misconceptions people have. One memory of the conference will forever stay with me. After sharing my personal story about the devastating emo-

tional, psychological and social effects of smoking marijuana on a daily basis, a young lady about 16-years-old approached me. With tears in her eyes she expressed her gratitude that someone else had "felt exactly the way I did." She no longer felt so alone and different and shared she was going to talk to her parents about seeking help for her marijuana addiction."

The Town Hall Meeting addressed both the need for a clear and consistent no-use prevention position, and how personal recovery stories can provide a powerful witness to the potential for abuse and addiction to marijuana in young people.



2003 Trends Report and DASA Annual Report Now Available

By David H. Albert, Senior Planner and Policy Analyst

The Division of Alcohol and Substance Abuse (DASA) has just published two new reports. The first is *Tobacco*, *Alcohol*, *and Other Drug Abuse Trends in Washington State – 2003*. This is the 11th Trends report documenting the effects of substance abuse among individuals, families, and communities in Washington State, as well, as the positive impacts of quality substance abuse prevention, intervention, and treatment services. This year's report highlights "new/changing trends" revealed through analysis of the data. Two in particular are worth noting:

- Chronic drinking rates in Washington State are on the rise, and are at their highest point in more than a decade.
- For the first time in a decade, the number of reported methamphetamine laboratories/dumpsites is dropping.

The report also examines four policy issues confronting the state: alcoholism as a chronic disease; criminal justice; opiate substitution treatment; and substance abuse and aging.

DASA has also released its 2003 Annual Report. This report describes the work of the division, our budget priorities, and new and continuing initiatives. Both reports are available through the Alcohol and Drug Clearinghouse (1-800-662-9111), and will be available online on DASA's website: www1.dshs.wa.gov/dasa/. For more information about either of these two reports, please contact David H. Albert at (360) 407-0822; or, e-mail: alberdh@dshs.wa.gov.



Attorney General Christine Gregoire Announces Removal of Tobacco Ads From School Magazines

Major tobacco companies have agreed to remove cigarette and smokeless tobacco advertisements from the editions of Time, Newsweek, and U.S. News and World Report that are sent into classrooms for use by students, according to Attorney General Christine Gregoire.

Gregoire welcomed the move by Brown & Williamson Tobacco Corp., Philip Morris USA Inc., R.J. Reynolds Tobacco Co., and U.S. Smokeless Tobacco Co.



"Millions of kids read these magazines in their schools every week," Gregoire said. "We are pleased that the companies have responded favorably to our request that they discontinue their ads in these school editions. This will significantly reduce our kids' exposure to tobacco advertising."

The magazines' school programs, known as Time Classroom, Newsweek Education Program, and U.S. News Classroom Extension Program, distribute hundreds of thousands of copies of the magazines to high school and middle school classrooms in the United States each week.

The four tobacco companies had placed approximately 120 cigarette and smokeless tobacco ads in these three magazines from January 2002 through June 2003.

In June, the Tobacco Enforcement Committee of the National Association of Attorneys General wrote to the four companies, asking that they make arrangements with the publishers to ensure that their tobacco ads did not appear in the classroom editions. Discussions with the companies led to each company's commitment to eliminate its ads from those editions.

For more information, contact Maureen Scharber, AG Public Affairs, (360) 753-6224.



To continue bringing you useful information in FOCUS, let us know what matters most to you, and the drug prevention and recovery news and successes happening in your community. Send your comments and information to Deb Schnellman at schneda@dshs.wa.gov.

Daybreak and Perinatal Treatment Services Selected to Lead Field in Process Improvements

By Jim Loudermilk and Kay Seim

Daybreak, a local non-profit provider of drug counseling and treatment for adolescents, and Perinatal Treatment Services in Tacoma, which serves pregnant and parenting women, have been chosen as two of only 10 drug treatment sites in the U.S. to participate in a national program of the Robert Wood Johnson Foundation. The program, Paths to Recovery, will teach process improvement methods that have been pioneered in other technology, manufacturing, and health care industries. By learning these methods, the treatment organizations can improve their client care and customer services.

Daybreak will receive a grant of \$180,000 over the next 18 months to support the creation and training of teams that will learn and use the process improvement methods.

"We certainly take it as a great honor to have been selected", said Tim Smith, Executive Director of Daybreak. "We want to become a better treatment organization, and these methods will help us become more effective in our counseling, more efficient in our use of resources, and more adaptable to the challenges of the future.

Perinatal Treatment Services (PTS) will receive \$208,075 over 18 months. "In our case, we treat pregnant and parenting women who misuse substances during pregnancy or parenting an infant or toddler", explained Kay Seim, director of PTS. "These women were mostly raised by mothers who misused drugs. We feel honored to be given this worthwhile grant to recruit and retain women in treatment with their children, to teach them a healthier lifestyle and how to parent in a loving manner. This decreases the risk that their children will wind up in the same circumstance and repeat the cycle."

"Fewer than one in four people addicted to alcohol or other drugs receives treatment, and as many as half of those who do get into treatment leave or drop out before the full benefits of treatment can be realized," explains David Gustafson, director of the Paths to Recovery initiative. "For some the issue is finances, for others the issue is readiness. But we found that often the real issue keeping patients from treatment is the way that services are delivered, and this is the issue each organization participating in the Paths to Recovery program is addressing."

The ten sites were chosen because they are innovators and leaders in their respective areas of treatment work. By redesigning processes such as client intake, assessment, scheduling, outreach, and family involvement, the Paths to Recovery goal is to create a more efficient system that is less frustrating for both clients and staff, and that makes it easier for clients to complete treatment.

"We are learning new methods, and we are learning a new way of addressing and solving the many challenges that we face as a complex, growing health care organization", says Smith. "We know that as we become more proficient in our efforts, our clients and our community will benefit."

For more information about the Paths to Recovery project and the selected treatment sites, please visit www.pathstorecovery.org. Jim Loudermilk of Daybreak may be reached at (509) 444-7033 ext. 102. Kay Seim of Perinatal Treatment Services may be reached at 206-223-1300 x239 or kays@ptswa.org.

DASA's Field Training Plan

By Dixie Grunenfelder

At a funding level equivalent to last biennium, the Division of Alcohol and Substance Abuse (DASA) Field Training Plan has many familiar components as well as some new and exciting projects.

In addition to co-sponsoring various conference events, DASA will take the lead on three major conference events, including:

The Treatment Institute, June 27 — July 1, 2004

The Co-Occurring Disorders (COD) Conference,

September 13 - 14, 2004

The Prevention Summit, October 21 – 23, 2004

DASA will continue to support the Substance Abuse Prevention Specialists Trainings across the state, and both the Youth and Adult versions of the COD Case Management Institute at Western State Hospital.

DASA will be working on three new training projects this biennium, including: 1) Workforce Development focusing on efforts to recruit persons into the field and provide top-quality preservice training options; 2) Administrator training geared toward offering relevant training for agency administrator staff; and, 3) Clinical Supervision training which will offer the basic three-day course, as well as some options for advanced information and networking.

DASA is in the process of contracting with eight colleges and universities across the state to provide tuition assistance to low income students studying to become chemical dependency counselors. The colleges participating in the program this biennium include: Clark College, Columbia Basin College, Eastern Washington University, Highline Community College, Seattle Central Community College, Tacoma Community College and Yakima Valley Community College. Recruitment and selection of students is done by the participant colleges/university.

For further information on the DASA Field Training Plan, contact Dixie Grunenfelder, at (360) 438-8219 or grunedd@dshs.wa.gov.

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FAS Workgroup Presents Goals for 2004

By Sue Green

Fetal Alcohol Syndrome (FAS) and Fetal Alcohol Effect (FAE), also known as Fetal Alcohol Spectrum Disorders (FASD) (Streissguth and O'Malley), Partial Fetal Alcohol Syndrome, and Alcohol Related Neurodevelopmental Disorder, are the leading known causes of mental retardation and are 100 percent preventable. Each year, approximately 12,000 infants are born in the United States with FAS and FAE, suffering irreversible life-long physical and mental damage. FAS and FAE are national problems that can impact any child, family, or community. In 1995 the Washington State Legislature unanimously passed Senate Substitute Bill 5688, directing DSHS, the Office of Superintendent of Public Instruction, the Department of Health, and the Department of Corrections to execute an agreement ensuring the coordination of programs serving children who have FAE, and for women at high risk of having children with FAE. The legislation included the first provision in Washington State history for family advocacy groups to participate in the planning, development, delivery, and review of services administered or contracted by the agencies executing the agreement.

The Division of Alcohol and Substance Abuse (DASA) has voluntarily served as program chair of the Fetal Alcohol Syndrome Interagency Workgroup (FASIAWG) since its inception in 1995, to ensure continued development and implementation of services. Other groups actively participating in FASIAWG are: the Fetal Alcohol Syndrome Family Resource Institute (FAS*FRI); the University of Washington Fetal Alcohol Syndrome Diagnostic and Prevention Network (FAS DPN); the University of Washington Fetal Alcohol and Drug Unit (FADU), which includes the Parent-Child Assistance Program (P-CAP); the Governor's Office of Indian Affairs (GOIA); Children's Administration (CA); and the March of Dimes. Representatives from these agencies and groups have voluntarily agreed to continue meeting as the FASIAWG in an effort to oversee the implementation of this collaborative project.

The FASIAWG represents a diverse spectrum of programs designed for individuals and families with FAS and FAE. This network of educational, research, and clinical services responds to the legislative mandate to ensure coordination of identification, prevention, and intervention programs for children who have fetal alcohol effects and for women at high risk of having children with fetal alcohol effects.

The FASIAWG presented their annual report to the Governor's

Council on Substance Abuse on November 7, 2003. This report outlines the workgroup's goals for the issue of Fetal Alcohol Syndrome/Effects in Washington State. These goals include:

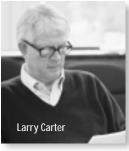
- Include FAS as an eligibility category of the Division of Developmental Disabilities (DDD) in Washington State, regardless of the IQ level of the affected individual. To accomplish this goal, additional resources would need to be allocated for DDD to provide services to this population, i.e., through an alcohol tax as proposed by House Bill (HB) 2004.
- Continue and expand the Washington State FAS Diagnostic and Prevention Network (FASDPN) of clinics. Provide fiscal support to each network clinic in order to support costs that the clinics have demonstrated cannot be obtained from fee-for-service, cost-shifting, and in-kind sources.
- 3. Continue and expand the University of Washington Parent-Child Assistance Program (P-CAP), including regular hospital screening of pregnant and delivering mothers using the Hospital Screening Questionnaire in all communities where P-CAP is ongoing.
- 4. Support the development and evaluation of a demonstration project to provide residential services and supports for young adults and adolescents with FAS and FAE.
- 5. Continue and expand the FAS Family Resource Institute's (FAS*FRI) statewide efforts involving family advocacy, training, hotline, and information dissemination.
- 6. Support Washington State Indian Tribes, native communities, migrant communities, and minority communities in their efforts to develop FAS prevention and intervention projects.
- 7. Support future annual FAS and FAE conferences and other means of information dissemination through the FASIAWG.
- 8. Provide technical assistance to DOH for the purpose of determining how children with FAS and FAE will be included in the department's current birth defects surveillance efforts.
- 9. Continue and expand funding and coordination between the FAS DPN and Children Administration's Foster Care Passport Program to provide FAS screening.
- 10. Actively promote primary prevention strategies and campaigns to inform and educate women and men about this fully preventable life long disability. Campaigns may be media oriented or policy advocacy including labeling, location of retail outlets and taxation as a means of further limiting purchase to underage drinkers.

For additional information on FASIAWG or for a copy of their report, contact Sue Green, greensr@dshs.wa.gov.

Citizen's Advisory Council Initiatives for 2004

By Larry Carter, Chair, Citizens Advisory Council

The Citizens Advisory Council (CAC) on Alcoholism and Drug Addiction, the statutorily created advisor to the Secretary of the Department of Social and Health Services, is planning initiatives in a number of areas. In addition to supporting the recommendations of the Division of Alcohol and



Substance Abuse (DASA), the CAC has established the following goals for the coming year:

- To create awareness among local governments, local elected officials, and legislators about the cost savings and costs offsets that result through the delivery of quality chemical dependency prevention and treatment services, and to work for increased funding for programs;
- To continue efforts to coordinate the biennial prevention planning process with other state agencies and develop a framework through which local communities can create a common, meaningful, realistic, data-driven needs assessment:

- To work with DASA and communities to attract new professionals to the challenging chemical dependency field;
- To establish working relationships with representatives of Indian sovereign nations in Washington State as we work together to build communities free of alcohol and other drug abuse; and.
- To continue work with the King County Bar Association Drug Policy Project to advocate for a compassionate, equitable policy related to drug offenders, and with a strong emphasis on the provision of quality alcohol and drug prevention and treatment services.

Each of the individual members of the CAC has adopted one or more of the initiatives set forth above as part of their work for the Council. There is much to be done. In addition to the foregoing, the Council will continue to carry out its work as mandated by statute which includes overseeing the Peer Review process of Washington State substance abuse treatment activities, and holding a public hearing on the application of DASA for federal block grant funds.

Anyone who would like more information on the CAC and its work, please contact either Larry Carter, Chair of the CAC at 425-702-5748 or Doug Allen, Chief, Office of Policy, Planning, and Legislative Relations toll free at 1-877-301-4557 or allende@dshs.wa.gov. We are always looking for qualified individuals in Washington State to assist in this work.

From Spirit Sticks to S'Mores

By Stephen Bogan, DASA Youth Treatment Lead

The Ninth Annual Youth Treatment Conference, affectionately known as "Counselor Camp," took place on September 27, 28, and 29 in the crisp fall colors of beautiful Camp Cispus near Randall, Washington. Over 170 youth treatment counselors and other staff attended over the course of the three days. Many arrived on Saturday evening and joined with a number of special guests from Alaska for the first evening event, which consisted of gathering together to create "spirit sticks" to symbolize the pain and healing that brought us all together.

It was so amazing to see over one hundred adults crawling around on the floor among beads, branches, shells, yarn, wire, feathers, and other sparkling items, translating their voice into symbols to pass on to others. The special guests from Alaska, Christine Thomas from Sitka, Ruth Simpson from Juneau, and Vacharee

Howard from Anchorage, were invited by Judi Bixby from Lakeside-Milam. They certainly shared in the spirit of healing and friendship with all of us.

The many workshops provided insight into working with youth and counselor self-care, free time provided sharing with friends and nature, and the adults got to have fun on Sunday night by singing and making messy, gooey, S'Mores. Special thanks again goes to Sabrina DeLefuente who provided coordination, leadership, and hard work to plan and put on a very successful conference.

The 2003 Passionate Youth Professional Awards, named after Richard Rivera and Thelma B. Robinson, were given out to eight highly valued youth treatment staff from a variety of treatment settings. Richard Rivera Awards were given to Bill Pierpoint from Providence St. Peters, Ryan Pinto from the Juvenile

Rehabilitation Administration, Bryan Cussons from Sundown M Ranch, and Johnny Ohta from Ryther Child Center. Thelma B. Robinson Awards were given to Vicki Stark from Perinatal Treatment, Cathy Werden from Northwest Alternatives, Denise McGaughey from Educational Service District 114, and Karina Ray from Ruth Dykeman Children's Center. Everyone was deserving of the honor, and especially touching was the standing ovation by his peers for Johnny Ohta, a dynamic youth counselor who has fought back from some very difficult struggles in his career.

Ed Mosshart from Sundown M Ranch facilitated the closing ceremony on Monday. Many participated in some emotional sharing and described their healing process and the compassion they received from others during the three days. We couldn't help but feel thankful and at peace as we all drove away through the beautiful woods headed home.

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Helpline Employee Named Woman of the Year

By Ann Forbes

The Alcohol/Drug Helpline is pleased and proud to announce an award to an outstanding employee. Juanessa Scott has been named Woman of the Year by WoMen of Purpose International. She received the award as a result of her leadership and her regular contributions to

support their work. The award was presented to her in Portland, Oregon at the 10th Anniversary Celebration in November.

WoMen of Purpose is a Christian-based group dedicated to nurturing relationships among people of every ethnicity, denomination and social status.

Juanessa is the office manager at the Alcohol/Drug Helpline where she has worked since 1999. Her formal education began at Seattle Central Community College where she graduated with honors. She received a certificate in 'Non-profit Management' from the University of Washington in 2002. While at-

tending Evergreen she was a recipient of the 'Jackie Robinson Scholarship' which was awarded as part of opening ceremonies at a Seattle Mariners game. She also received the 'Thayer Raymond Scholarship' from The Evership' from The Evership' she was a recipient of the second she was a recipient of the 'Jackie Robinson Scholarship' which was awarded as part of opening ceremonies at a Seattle Marine she was a warded as part of opening ceremonies at a Seattle Marine she was a warded as part of opening ceremonies at a Seattle Marine she was a warded as part of opening ceremonies at a Seattle Marine she was a warded as part of opening ceremonies at a Seattle Marine she was a seattle was a seattle

green State College and Seattle Central Community College. In 2003 Juanessa graduated with a BA degree from Evergreen State College. Juanessa is currently pursuing a graduate degree at Western Washington University. She is a single mom, just turned 50, and is raising her two-year-old grandson.

Once incarcerated in a California State Penitentiary, Juanessa, who has been in recovery for seven years, would like others to know that their lives can change with hard work and determination. "Having hope changes most circumstances in our lives! It gives us the courage to continue on and face the new challenges of everyday living."

This is a well-deserved award given to a woman who truly has purpose in her life. More information about WoMen of Purpose is available online at www.womenofpurpose.com.



SAMHSA 2002 National Survey on Drug Use and Health

The Substance Abuse and Mental Health Services Administration (SAMHSA) recently released results from the National Survey on Drug Use and Health (NSDUH), formerly named the "National Household Survey on Drug Abuse." The annual survey is the largest of its kind and is the Government's primary vehicle for determining how many people are misusing alcohol, tobacco and other drugs.

The 2002 NSDUH estimates that among the general population, age 12 and older:

- 120 million Americans were current alcohol users;
- 75.1 million Americans were current tobacco users;
- 19.5 million Americans were current illicit drug users; and
- 22 million Americans were classified with misuse or dependence on either alcohol, illicit drugs or both.

The entire report may be accessed online by visiting

http://ncadi.samhsa.gov/newsroom/nsduh2002.aspx. To order a free printed copy online, visit http://ncadi.samhsa.gov/order.aspx?ID=16642.

To order by phone, call the National Clearinghouse on Alcohol/Drug Information at (800) 729-6686 and ask for inventory number BKD490.



April is Drug Free Washington Month

Drug Free Washington Month is a campaign in April to raise awareness among Washington's families and communities about the importance of keeping youth drug-free, and to celebrate the people who make prevention a success in their communities.

The theme for DFWM 2004 is "Show the World That We Can Be Drug Free". The theme was submitted by Laura Michelle Dick, an 11th grade student at Lake Roosevelt High School in Nespelem. Laura and her winning theme were recognized at the 2003 State Prevention Summit by Lt. Governor Brad Owen, and by the Colville Tribe's Tobacco Prevention Program, which Laura participates in.

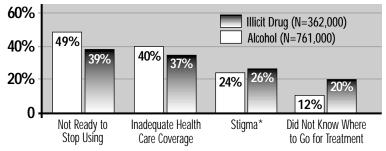
Prevention resources to distribute during Drug Free Washington Month, and throughout the year, are available from the Washington State Alcohol/Drug Clearinghouse. Contact them at 1-800-662-9111, clearinghouse@adhl.org, or online at http://clearinghouse.adhl.org.

Alcohol Dependent Adults Receive Only One-Tenth of Recommended Health Care for Their Dependence

Americans receive less of the recommended health care for alcohol dependence than other medical conditions, according to a study of health care received by a random sample of adults living in 12 metropolitan areas. The study compiled indicators of the quality of health care for 30 medical conditions identi-

fied as the leading causes of illness and death and the most common reasons for physician visits. Alcohol dependence ranked at the bottom of the list of conditions, with patients only receiving 11% of recommended care. In contrast, patients with breast cancer, hypertension, depression, asthma, and diabetes received four to seven times more of the recommended healthcare for their conditions (see figure). These findings support recent research indicating that medical professionals may not be taking advantage of the opportunities they have to address their patients' drinking behaviors.

Percentage of U.S. Residents (Aged 12 or Older) with an Alcohol or Illicit Drug Problem Who Felt They Needed But Did Not Receive Treatment, by Reason for Not Receiving Treatment, 2002

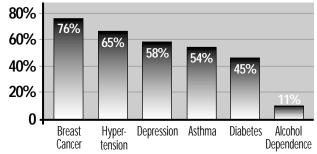


Reason for Not Treating

NOTE: Stigma included (1) might cause neighbors or community to have negative opinion, (2) might have negative effect on job, and (3) ashamed/embarrassed/afraid to go to treatment or were afraid they would get in trouble with the police or social services.

SOURCE: Adapted by Center for Substance Abuse Research (CESAR – www.cesar.umd.edu) from Substance Abuse and Mental Health Services Administration (SAMHSA), "Reasons for Not Receiving Substance Abuse Treatment," *The NSDUH Report*, November 7, 2003. Available online at http://www.samhsa.gov/oas/2k3/SAnoTX.cfm.

Percentage of Recommended Care Received by Persons With Medical Conditions, 1998-2000



SOURCE: Adapted by Center for Substance Abuse Research (CESAR — www.cesar.umd.edu) from McGlynn E. A., Asch S. M., Adams J., Keesey J., Hicks J., DeCristofaro A., Kerr E. A., "The Quality of Health Care Delivered to Adults in the United States," *The New England Journal of Medicine* 346(26):2635-2645, 2003. For more information, contact Dr. Beth McGlynn Ph.D. at beth_mcglynn@rand.org.

Lieutenant Governor Presents Exemplary Prevention Awards

By Shelli Young, Region 1 Prevention Manager

In October Lieutenant Governor Brad Owen honored eleven awardees in a ceremony at the 2003 Washington State Prevention Summit in Yakima, Washington.

The Washington State Exemplary Substance Abuse Prevention Awards began in 1999, through the efforts of DASA and its partners, as a way to recognize and celebrate extraordinary efforts in the prevention field. Substance abuse prevention programs, those individuals and groups working in the prevention field, and media partners who support prevention, are nominated through an application process to be considered for Exemplary Prevention Awards.

Awardees included:

The Snoqualmie Tribe Canoe Journey

Project, Marie Ramirez
Project WE CAN, Patricia Fabiano
Adams County SPARC
Seeds of Change: Partners for a DrugFree Community
Ramona Leber, Longview
David Funk, Grand Coulee Dam Middle
School
Ron Hall, The Islands' Weekly
Cliff Johnson, Clear Channel Outdoor
Kerry Moor, Viacom Outdoor

Northwest Cable News

Sleep Country USA

A review committee evaluates the applications received and approves those meeting the selection criteria. Members of the committee also nominate and select additional awardees for special contributions to the field. The review committee includes representatives from the Lieutenant Governor's Office, the Washington Interagency Network, the Division of Alcohol and Substance Abuse, and its Citizen Advisory Committee.

Washington State Exemplary Programs are eligible to apply for an award at the national level.

For more information about the Washington State Exemplary Substance Abuse Prevention Awards, contact Shelli Young at (509) 329-3734, or youngsv@dshs.wa.gov.

Congratulations to all 2003 awardees, and thank you for your contributions to prevention!



Jim Cashman retired from DSHS-DASA December 24, 2003, after 33 years of public service. After three years in the army, Jim completed his college education and began his career working for the Leg-

> islature in 1973. Later he joined the Office on Alcoholism where he worked in the Management

Information System (back when it was done mostly with pencil and paper), as a surveyor in the Certification Section, and most recently as DASA's Incident and Complaint Manager.

Jim isn't committed to any one idea on how he plans to spend his retirement as yet. "I think the world will look a whole lot different to me six months from now," he said at his retirement reception, so he wants to keep his options open.

Until Jim's new view of the world comes into focus, he plans to occupy his time with "a lot of golf and a lot of piano." Jim's choice for what to do with the retirement money collected from staff for his retirement gift? He is donating it to benefit the often forgotten and disenfranchised people DASA serves; the money will go toward the next Oxford House that opens.

I am very pleased to announce that Dennis Malmer has been selected as Project Director for the Washington State Screening, Brief Intervention, Referral and Treatment (WASBIRT) Project. The five-year project, funded at \$16.1 million, will use chemical dependency professionals to provide early intervention services in hospitals, general medical, and community settings to reach people at risk of abuse and dependence on alcohol and other drugs. Six

DASA Receives Federal Grant to Implement Screening, Brief Intervention, Referral and Treatment Project

By Fred Garcia, Office of Program Services



hospital emergency departments (EDs) located in Clark, Pierce, King, Snohomish, and Spokane Counties will participate.

The partners in preparing the proposal included the Department of Social and Health Services' (DSHS)

Medical Assistance Administration, Research and Data Analysis and Mental Health Divisions; the Department of Health's Office of Emergency Medical and Trauma Prevention; and County Alcohol and Drug Coordinators in Clark, Pierce, King, Snohomish, and Spokane Counties.

The DSHS Division of Alcohol and Substance Abuse (DASA), will administer the project. In the proposal, as submitted by Governor Gary Locke, DASA is directed to form a Policy Steering Committee (PSC) to oversee the project's implementation and to advise Washington State on issues related to systems change, early intervention, and substance abuse. The project's aim is to screen 40,000 ED patients every year to determine if substance abuse played a role in the trauma that led to the ED. Inter-

vention and treatment services will be offered. Dennis will lead and facilitate this exciting project.

Dennis has been with DASA for the past seven years, serving most recently as the Certification Section Policy Manager. He grew up in Wisconsin and has over 32 years of experience in the chemical dependency (CD) field. He began his career in the CD field in Minnesota in 1971. Dennis has been a chemical dependency counselor, clinical supervisor, director, and executive director of a number of agencies over the past 32 years. Prior to his DASA experience, Dennis was a senior manager and responsible for coordinating chemical dependency treatment services as part of a behavioral health program in a hospital in Southwest Washington. He also is a founding director of two private treatment agencies, treating adult and adolescent patients.

WASBIRT is in good hands, and will once again elevate Washington to a national leader in weaving intervention services into the chemical dependency treatment system.

Register Now for Alcohol Screening Day 2004

National Alcohol Screening Day (NASD), a program of Screening for Mental Health, will be held April 8, 2004, during Alcohol Awareness Month. The program addresses a range of drinking behaviors from at-risk to alcohol dependence. NASD is designed to raise public awareness about the consequences of at-risk drinking and alcohol's effects on general health.

The alcohol screening program includes a written questionnaire using a valid, reliable screening instrument and an opportunity for participants to meet with a health professional. Referrals for further evaluation and/or treatment are provided when appropriate.

Over 3,200 sites participated in National Alcohol Screening Day in 2003. With their help, over 62,000 people took the screening test and found out how alcohol may be affecting their health. Two Washington State agencies made the top five list of most successful community screening sites in the country:

Top 5 Community Sites

- Army Substance Abuse Program (Military), Fort Benning, GA.
 Number Screened – 1116
- Asian Counseling & Referral Service (Community Mental Health Center), Seattle, WA.

Number Screened - 340

- Department of Behavioral Health, Chinle Out-Patient Treatment Center (Substance Abuse Facility), Chinle, AZ.
 Number Screened – 221
- Akron General Medical Center (Substance Abuse Facility), Akron, OH.
 Number Screened – 195
- Columbia Basin Health Association (Community Health Center), Othello, WA. Number Screened – 194

To find out how to host a National Alcohol Screening Day Event in your community, contact the NASD office at (800) 253-7658 or email, nasd@mentalhealthscreening.org. In order to guarantee delivery of your kit(s) by April 8, you must register by March 29, 2004.

New Website Makes it Easier to Apply for Federal Grants

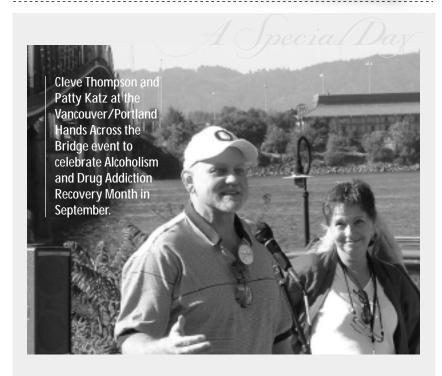
The Federal government has put together what is being billed as the one stop shopping for federal grants.

Grants.gov is a simple, unified "storefront" for all customers of Federal grants to electronically find, apply for, and manage grants.

Grants.gov encompasses over 900 grant programs offered by the 26 Federal grant-making agencies. It streamlines the process of awarding over \$350 billion annually to state and local governments, academia, not-for-profits and other organizations.

Grants.gov is one of 24 Federal cross-agency E-Government initiatives focused on improving access to services via the Internet.





Partnership Attitude Tracking Study Finds Majority of Parents Not Responding to **Ecstasy Threat**

Despite increases in teen Ecstasy use over the past few years, American parents are far less likely to talk with their kids about Ecstasy than any drug

- legal or illegal, according to a national survey

released in October by the Partnership for a Drug-Free America (PDFA).

"Most parents remain surprisingly unfazed, unmotivated and non-responsive to the threat of Ecstasy in America," said Steve Pasierb, president and CEO of PDFA. "The majority of parents have heard about the risks of using this drug, but few are translating that awareness into preventative action at home."

The 2003 Partnership Attitude Tracking Study (PATS) surveyed 1,228 parents across the country (margin of error = \pm /- 2.8 percent). Top-line findings of the nationally projectable study show:

- 92 percent of parents say they've heard about Ecstasy, and 90 percent see great risk in regular Ecstasy use;
- Only one in four parents (24 percent) say they've talked with their children a lot about Ecstasy in the past year
- Only three percent of parents believe their teenager may have used Ecstasy already;
- 41 percent of parents have never talked with their kids about Ecstasy; and
- · Among drugs parents talk with their kids about, Ecstasy was less likely to be discussed than any other drug - including alcohol.

The survey reports that parents are hungry for information about Ecstasy. More than half of parents (52 percent) say they need additional information on the dangers of the drug. PDFA's National Ecstasy Education Campaign is providing new Ecstasy messages through state and local affiliates, such as Partnership for a Drug Free Washing-

Airtime for these messages will receive a substantial boost from a new and historic partnership with Comcast Cable. 35 media markets, including Seattle and Spokane, will benefit from a three-year commitment of \$50 million in advertising exposure.

"We're pleased to be able to use our advertising inventory, as well as our products and services, to help the Partnership

> for a Drug-Free America deliver messages of 'hope, help, and warning,'" said Steve Burke, president of Comcast Cable. "Our 55,000 employees have a personal and business interest in making a difference in the communities we call home."

The majority of initial campaign messages will focus on educating viewers on Ecstasy and methamphetamine abuse, as well as encouraging parents to make "knowing the whereabouts of their teens" a high priority. Over time, the campaign increasingly will focus on regional needs and drug threats. The Partnership's messages will air on a wide range of cable networks on Comcast

systems across a variety of dayparts, including prime time.

"One of the key advantages of our relationship with Comcast will be the ability to address regional drug threats, like Ecstasy," he said. "While Ecstasy is a problem nationally, it is an acute problem among teens in certain cities like Philadelphia, Chicago, Denver and Seattle. Comcast's local cable systems can help us deliver the right campaigns to the right cities.

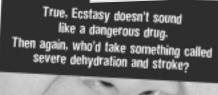
The Partnership Attitude Tracking Study and additional information on Ecstasy are available on-line at www.drugfreeamerica.org. For more information about Partnership for a Drug Free Washington, contact Deb Schnellman at schneda@dshs.wa.gov or (360) 438-8799.

New Ecstasy prevention messages are available at www.drugfree.org" or by emailing schneda@dshs.wa.gov.



Did you know more than 1 in 10 teenagers have tried Ecstasy? Or that less than half of teens think there is great risk in trying Ecstasy once or twice? Make sure your kids get the entire story on this dangerous drug. Visit askyourkidsaboutE.com, then talk to your kids. if they know you know, they might not use.

Partnership for a Drug-Free America^o





Ecstasy sounds harmless, but in high doses it can cause a sharp increase in body temperature, leading to kidney and cardiovascular system failure. More than 1 in 10 American teens have already tried Ecstasy. Make sure your teen knows the risks. Visit <u>askyourkidsaboutE.com</u>, then talk to your kids. If they know you know, they might not use.

Partnership for a Drug-Free America®

New Resources from SAMHSA To Keep Kids Alcohol-Free

Think children age 9 to 13 are too young for anti-alcohol messages? Think again.

By eighth grade, many students are already drinkers. The 2002 Washington State Healthy Youth Survey found that 18 percent of 8th graders reported that they had downed at least one drink in the last month. Underage drinking doesn't just harm children's physical and psychological development, either. It also sets them up for problems later in life. In fact, a SAMHSA study shows that kids who first try alcohol at age 14

or younger are 4-1/2 times more likely to develop alcohol misuse or dependence problems later in life than those who have their first drink at 18 or older.

To stop such problems before they begin, SAMHSA's Center for Sub-



too SMART to START

stance Abuse Prevention (CSAP) is launching a national public education initiative in January called "Too Smart to Start." Part of the Centers for Disease Control and Prevention's National Youth Media Campaign to Change Children's Health Behaviors, the initiative provides research-based materials and strategies that professionals and volunteers at the local level can use to educate their communities' children - and parents or other caregivers - about the dangers of underage drinking.

To help get the message out, several national organizations - the American Medical Association, Community Anti-Drug Coalitions of America, Mothers Against Drunk Driving, National Association of State Alcohol and Drug Abuse Directors/National Prevention Network, National Council on Alcoholism and Drug Dependence, National Family Partnership, and PRIDE Youth Programs - will help publicize the initiative and disseminate its materials to their community-based affiliates. Ten community-based projects around the country will also be involved as pilot programs.

Together they will work to meet the initiative's specific objectives of increasing the number of conversations children and adults have about the harms of underage drinking, increasing the percentage of 9- to 13-year-olds and their parents or other caregivers who view underage drinking as a problem, and increasing the general public's disapproval of underage drinking. An evaluation will assess the initiative's impact in the 10 pilot sites.

"It's a whole lot easier to keep children from starting to use alcohol in the first place than it is to intervene once they've become drinkers," said CSAP Director Beverly Watts Davis. "With this initiative, every member of the community can help us keep youngsters from taking that first sip of alcohol."

Developed with input from 9- to 13-year-olds and their parents and other caregivers, "Too Smart to Start" puts the issues important to young people at its center. The initiative's philosophy is to allow young people themselves to offer advice and help create prevention efforts rather than simply participate in them. As young people introduce their parents and other caregivers to today's youth culture, adults' roles shift

> from directing activities to acting as partners and supervisors. While kids learn the importance of not drinking, adults learn how to listen and modify their own behavior.

> The initiative provides everything that children, par-

ents, and other community members need to start their own ongoing campaigns against underage drinking.

One key resource is the Too Smart to Start: Community Action Kit, which features an implementation guide offering information about underage drinking and step-by-step advice on starting local projects. The guide explains how to research target audiences, assess local needs, identify partners, create an action plan, and raise public awareness through presentations, special events, educational programs, and the mass media. It also features such resources as a needs assessment form, talking points for presentations, a quiz, press release guidelines, and a sample letter to the editor. In addition to the guide, the kit includes a brochure, a poster, a "SmartSTATS" data book, booklets for parents, PowerPoint presentations, and sample public service announcements for print, radio, and television.

The initiative offers plenty of other materials to support local efforts. Additional "Too Smart to Start" materials include posters for both children and adults, ready-to-use public service announcements, booklets that help parents and other caregivers talk to children about drinking, and a board game designed to dispel common myths about alcohol use and encourage open discussion about drinking.

All "Too Smart to Start" materials are available free of charge; the initiative also offers communities free technical assistance on a wide range of topics. To order materials or arrange technical assistance, contact SAMHSA's National Clearinghouse for Alcohol and Drug Information at 1-800-729-6686 or 1-800-487-4889 (TDD); or go to www.ncadi.samhsa.gov.

New Report Shows Similar Levels of Satisfaction Between Private Pay and Publicly Funded CD Clients

By Felix Rodriguez, Ph.D., Research and Evaluation

Private pay and publicly funded adult clients in community intensive inpatient and outpatient chemical dependency (CD) treatment programs in Washington State reported similar levels of satisfaction with service received, according to a report based on the 2003 Statewide Client Satisfaction Sur-

vey. Among other questions, the survey asked clients how satisfied they were overall with the service they have received. In participating community intensive inpatient programs, 96.2 percent of private pay and 96 percent of publicly funded clients reported being very satisfied or mostly satisfied with service received. In participating community outpatient programs, 97.3 percent of private pay and 96.3 percent of publicly funded clients reported being very satisfied or mostly satisfied with service received.

The survey also found that there was only a small difference in clients' reported satisfaction with service received between community and the Department of Corrections (DOC) outpatient treatment programs. In participating community outpatient programs, 96.7 percent of adult clients reported being very satisfied or mostly satisfied with service received compared to 94.9 percent of clients in participating DOC outpatient treatment programs.

The 2003 Statewide Client Satisfaction Survey

took place during the week of March 24, 2003, through a partnership between the Division of Alcohol and Substance Abuse (DASA) and participating treatment agencies in Washington State. Eighty percent of the certified alcohol and drug treatment agencies in the state participated in the

survey. A total of 15,715 clients completed the survey, representing 75 percent of adult and youth clients receiving treatment in the participating agencies during the week of the survey.

More of the survey results can be found in the statewide report, Clients Speak Out 2003. The report also includes sections on how treatment providers, policy makers/ implementers, and other stakeholders used the previous survey results (2002) in ways that benefited not only individual programs but, also, the overall treatment system in the state. A copy of this report may be obtained from the Washington State Alcohol/ Drug Clearinghouse by calling 1-800-662-9111 or (206) 725-9696 (within Seattle or outside Washington State), by e-mailing clearinghouse@adhl.org, or writing to 6535 5th Place South, Seattle, Washington 98108-0243.

Other key findings from the survey contained in the report are:

- Overall, 96 percent of adults and slightly over 90 percent of youth clients in community treatment programs reported that they were satisfied with the service they received.
- Close to 98 percent of adults and 95 percent of youth clients in community treatment programs reported that staff treated them with respect.

The 2004 Statewide Client Satisfaction Survey, the fourth annual survey, will be conducted on March 22-26, 2004. All participating providers receive a complimentary, confidential report of results for their agency. Alcohol and drug treatment agencies wishing to participate in the survey should contact: Felix Rodriguez, Ph.D., at (360) 438-8629, or at rodrifi@dshs.wa.gov.

State and National On-line Resources

- Chemical Dependency Professionals of Washington: www.cdpcertification.org
- Community Anti-Drug Coalitions of America: www.cadca.org
- Join Together: www.jointogether.org
- > Media Literacy Education: www.teenhealthandthemedia.net
- National Anti-Drug Media Campaign: www.mediacampaign.org
- National Clearinghouse on Alcohol and Other Drug Information: www.health.org
- National Council on Alcoholism and Drug Dependence: www.ncadd.org
- > National Institute on Drug Abuse: www.drugabuse.gov
- Office of National Drug Control Policy: www.whitehousedrugpolicy.gov

- Partnership for a Drug-Free Washington & America: www.drugfree.org
- Substance Abuse and Mental Health Services Administration: www.samhsa.gov
- > Washington State Alcohol/Drug 24-Hour Helpline: www.adhl.org
- Washington State Alcohol/Drug Prevention Clearinghouse: http://clearinghouse.adhl.org
- Washington State Department of Health Tobacco Prevention and Control Program Newsletter: www.doh.wa.gov/tobacco
- Washington State DSHS Division of Alcohol and Substance Abuse: www1.dshs.wa.gov/dasa
- > Washington State Liquor Control Board: www.liq.wa.gov
- ➤ Washington State Office of Community Development Safe and Drug Free Communities: www.ocd.wa.gov
- Washington State Office of the Superintendent of Public Instruction
 Safe and Drug Free Schools: www.k12.wa.us/SafeDrugFree
- ➤ Washington Traffic Safety Coalition: www.wtsc.gov

Upcoming Education and Awareness Events: February – April



FEBRUARY '04

- 5 Chemical Dependency and Eating Disorders, Washington State Coalition on Women's Substance Abuse Issues, Burien. Contact www.wscwsai.org or (253) 863-9667
- 9-15 National Children of Alcoholics Week. Contact: National Association for Children of Alcoholics, (888) 554-2627. www.na0coa.org
- 14-17 National Youth Summit on Preventing Violence, Arlington, Virginia. Contact: National Crime Prevention Council. http://ncpc.org/summit
- 16-20 Substance Abuse Prevention Specialist Training, Eastern WA. Contact: (877) 301-4557 or grunedd@dshs.wa.gov
- 19-20 Region 3 and 4 Warm Beach Retreat. Contact: Ira Stallsworth, (360) 658-6892

Want to share FOCUS with others? Let them know it's on DASA's website at www1.dshs.wa.gov/dasa (click on "What's New")

For more information or to register for trainings, contact DASA's Training Section at 1-877-301-4557



MARCH '04

- -29 BACCHUS and GAMMA Safe Spring Break. Contact: BACCHUS & GAMMA peer education network, (303) 871-0901, www.bacchusgamma.org/
- 2-8 National Collegiate Health and Wellness Week. Contact: www.bacchusgamma.org/
- 16 Chemical Dependency and Eating Disorders, Washington State Coalition on Women's Substance Abuse Issues, Yakima. Contact www.wscwsai.org or (253) 863-9667.
- 21-27 National Inhalants and Poisons Awareness Week. Contact: National Inhalant Prevention Coalition, (800) 269-4237 or www.inhalants.org
- 24-26 OSPI Spring Collaboration Institute. Yakima Convention Center. Contact (360) 725-6049 or sacton@ospi.wednet.edu
 - 31 KICK BUTTS DAY CAMPAIGN FOR TOBACCO FREE KIDS. Contact: National Center for Tobacco Free Kids (800) 284-KIDS. www.tobaccofreekids.org and www.kickbuttsday.org



APRIL '04

Drug Free Washington Month. Contact: Washington State Alcohol/Drug Clearinghouse (800) 662-9111, clearinghouse@adhl.org, or http://clearinghouse.adhl.org

National Alcohol Awareness Month. National Council on Alcoholism and Drug Dependence: (800) 622-2255 or www.ncadd.org/programs/awareness

Child Abuse Prevention Month. Contact: www.wa.gov/dshs/geninfo/endharm.html or www.preventchildabuse.org

- 8 National Alcohol Screening Day. Contact: National Mental Illness Screening Project, (781) 239-0071 or http:// www.mentalhealthscreening.org/ alcohol.htm
- 19-23 Substance Abuse Prevention Specialist Training, Western WA. Contact: Dixie Grunenfelder, (877) 301-4557 or grunedd@dshs.wa.gov
- 25-30 29th Annual Northwest Indian Youth Conference. Rapid City, SD. Contact: Melanie TwoEagle (605) 867-5161

A calendar of 2004 events and prevention and treatment success stories is now available on DASA's webpage: www1.dshs.wa.gov/dasa.

Printed copies are available from the
Washington State Alcohol/Drug Clearinghouse: 1-800-662-9111



Division of Alcohol & Substance Abuse P O Box 45330 Olympia, WA 98504-5330

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